ELECTRONIC CLAIMS REQUIREMENTS

For Medicaid and PeachCare for Kids Providers . . .

▶ *Introducing Georgia's New Medicaid Third-Party Administrator: the Georgia Health Partnership (GHP)*

▶ *Announcing New Claim Submission Options and Requirements for the Georgia Medicaid and PeachCare for Kids Programs effective April 1, 2003*

▶ *Announcing New Electronic Data Interchange (EDI) Capabilities for Other Types of Transactions*

Who Should Read This Guide

This brochure introduces the Georgia Health Partnership, highlights its capabilities to healthcare providers and explains how to get more information.

Please share this information with your computer and support staff and vendors.

The Georgia Health Partnership (GHP) is the new third-party administrator for the Georgia Medicaid and PeachCare for Kids programs.

As Medicaid and PeachCare for Kids providers, you need to know the following key facts about this change and the benefits the Georgia Health Partnership brings to you.

What is the Georgia Health Partnership?

The Georgia Health Partnership (GHP) was selected by the Georgia Department of Community Health, the Board of Regents of the University System of Georgia, and the Georgia Technology Authority to create and manage a state-of-the-art health care administration system for selected programs, including Georgia Medicaid and PeachCare for Kids. GHP consists of a prime contractor, ACS, Inc., a leading business process outsourcing firm, and a number of other leading companies in technical and health care services. ACS and its subcontractors have proven expertise in delivering high-quality health care services to state health care programs across the United States.

Effective Date for Change in Third-Party Administrator

GHP will replace the current third-party administrator, EDS, on April 1, 2003. Providers should begin submitting claims and other transactions to GHP as of that date.

A Special Note About the State Health Benefit Plan (SHBP) and the Board of Regents Health Plans (BORHP)

GHP will not support SHBP and BORHP benefit plans as of April 1, 2003. Providers should continue to submit SHBP and BORHP claims

to Blue Cross Blue Shield of Georgia as of April 1, 2003. DCH will provide additional information regarding GHP support of SHBP and BORHP at a future time.

New Options for Claims Submissions

GHP will implement a new computer system for claims processing, health care administration and provider support, replacing the current EDS system. The new GHP computer system will benefit providers participating in the Medicaid and PeachCare for Kids programs in many ways:

- More ways to submit claims electronically
- Quicker payments
- Ability to adjust claims on-line
- Electronic support for other health care transactions; GHP will provide methods for providers to submit and inquire about:
  - Member eligibility
  - Referral, prior authorization, and pre-certification
  - Presumptive eligibility
  - Provider application
  - Claims
  - Many other transactions

For more general information about GHP, visit the DCH web page at **www.communityhealth.state.ga.us.**

Decisions You Need to Make

To ensure smooth and timely claims payment as of April 1, 2003, providers and their billing support staff or billing vendors need to do the following:

Pick one or more submission methods.
Providers may use one or more methods for submitting claims and receiving data from GHP. The chart on the back page will help you understand your options. Preparing now for the April changes will make your claims submission process faster and easier.

Make decisions regarding HIPAA.
From April 1, 2003 to October 16, 2003, the date when the Health Insurance Portability and Accountability Act (HIPAA) transaction standards go into effect, GHP will support both HIPAA file formats and certain other formats that are similar to those in common use in the industry today. DCH encourages providers to move to HIPAA formats as soon as possible after April 1, 2003. As of October 16, 2003, GHP will support only the HIPAA formats.

Get ready to use national codes.
GHP is moving towards the use of national code sets mandated by HIPAA.

Many of the local procedure codes used today will be replaced by national codes effective for dates of service on and after April 1, 2003. The local codes for which an appropriate national code could not be found will continue to be used until further notice.

Other national code sets mandated by HIPAA such as ICD-9, Place of Service, etc., should be used for all claims submitted to GHP with dates of service on and after April 1, 2003.

For more information about HIPAA, please visit http://aspe.os.dhhs.gov/admnsimp/.

What About My Office Staff?

Provider office staffs may submit claims and other transactions on each provider's behalf. For providers who practice in more than one location, office staff in each location who utilize the web portal will be able to work on only the claims and other transactions pertinent to that location.

How Will I Submit Medicaid and PeachCare for Kids Claims to GHP?

Providers should electronically submit all claims and most other transactions to GHP. In limited cases, paper claims will also be accepted. For more on paper claims, please visit www.communityhealth.state.ga.us and go to the Frequently Asked Questions (FAQ) page, To access the FAQ's, click on the Medicaid link on the home page, and then click on the Provider Enrollment link on the next page displayed.

Providers may use one or more methods to submit claims and other transactions to GHP. Every provider should be able to utilize one or more methods appropriate for their size and computer capabilities:

Please note: any hardware changes or software upgrades or purchases are at the expense of the provider.

Internet Web Portal:

Providers may submit claims and other transactions using the GHP web portal specifically developed for Georgia Medicaid and PeachCare for Kids. Transactions may be keyed individually or submitted in batches from your computer system. Also, note that online editing and adjusting of claims can be done in real-time via the web portal. The web portal will be available April 1, 2003.

Dial-up Using WINASAP2000:

WINASAP2000 software is available for free to providers from GHP. This software is similar to the Electronic Media Claim (EMC) field software currently used by some providers to submit claims. **No Internet access is needed**. Providers may use an ordinary phone line to access the new system.

Dial-Up Using Other Software:

Providers may also use other software not supplied by GHP to submit batches of claims via ordinary phone lines. There are many possibilities, ranging from inexpensive electronic data capture and submission software to complex hospital and practice management computer systems. The key difference between this option and

WINASAP2000 is that WINASAP2000 is a self-contained software package, while other dial-up methods require some modifications to your existing system. The specifications for these modifications will be made available to your billing support staff, billing agents or IT department in January 2003. These specifications will be available in the form of documents called "Companion Guides". The Companion Guides will be available in January by visiting www.acs-gcro.com or by calling 800-987-6715 after February 3, 2003.

Clearinghouse:

A clearinghouse is a company that accepts claims from a provider and routes them to fiscal agents and other payers. The clearinghouse may also take responsibility for translating claims into formats that payers require. If you currently submit Medicaid and PeachCare claims to EDS via a clearinghouse, you can continue to do so with the new system as long as the clearinghouse makes the necessary modifications based on the specifications available in January.

Billing Agent:

A billing agent is a company that acts as a third party to providers, actually billing or entering the electronic claims on behalf of the providers. As with clearinghouses, providers will likely be able to continue to use a billing agent that currently submits to EDS once the billing agent makes the required changes to submit to the new system.

Lists of certified vendors, billing agents and clearinghouses will be available from ACS EDI Gateway Services, which may be contacted at www.acs-gcro.com or by calling 800-987-6715 after February 3, 2003.

Tape Cartridge, Host-to-Host:

Some large hospitals and other facilities currently submit claims to EDS on tape cartridges or "host-to-host" through telecommunication lines. These options will continue to be available with GHP and will be expanded to include additional types of transactions.

Benefits of electronic submission include:

- More streamlined business process
- Faster transfer of data
- Security of data with user passwords
- Far fewer errors
- Saves unnecessary recapture of data
- Less time wasted on exception handling

Receiving Data Electronically from GHP

Providers have several options for receiving transactions and other data back from GHP. First, for transactions keyed individually into the GHP Internet web portal, feedback will be provided immediately on the provider's computer screen. Second, for transactions submitted in batches, providers may obtain feedback via one of two methods. First, information may be downloaded from the Internet web site. Alternatively, for providers that do not use the Internet to submit and receive data from GHP, information may be downloaded from a bulletin board system (BBS) that can be accessed via a dial-up computer connection.

Getting Ready for April 1, 2003

Choosing an EDI Method
The chart on the back page will help you understand and determine the best electronic claim submission solution or solutions for your practice or facility.

Training

GHP will be contacting you shortly about training sessions for you, your office staff and billing vendors to be held across the state beginning in January, 2003. For more information or to register for these sessions, please visit our registration site at www.time2reg.com/ghpconferences.

ELECTRONIC DATA INTERCHANGE OPTIONS

Method	Requirements	Transactions Supported	Feedback Methods
Internet Web Portal	Computer with browser and Internet access. The portal will support Internet Explorer 5.0 or higher and Netscape 4.7.2 or higher. Transactions may be keyed individually (also called interactive entry) OR Transactions may be submitted in batches. For this option, your vendor, clearinghouse, or billing agent must use HIPAA standards	Claim submission and inquiry; Eligibility inquiry and response; Prior authorization request and response; Other transactions: Provider application, Member presumptive eligibility, Others	Real-time feedback via web for individual entry; Web portal (preferred) or bulletin board system (BBS) for batch submissions
Dial-up WINASAP 2000	Computer with dial-up capability; Windows 95 (or higher) operating system; Pentium or equivalent processor; CD-ROM drive; 50 megabytes of free disk space; WINASAP2000 software available free from GHP; 16 megabytes of RAM; Monitor resolution of 800 x 600 pixels (ideal setting); Hayes-compatible 9600 baud asynchronous modem; Telephone connectivity	Claim submission (key claims into WINASAP, then dial-up GHP to submit)	Immediate confirmation; Remittance advice via web portal or BBS
Other Dial-up Software	Hardware requirements will be determined by software vendor; Computer with dial-up capability; Ability to format files as HIPAA or other supported standards	Claim submission and inquiry; Eligibility inquiry and response; Prior authorization request and response	Web portal (preferred); BBS
Clearinghouse or Billing Agent	Ability to format files as HIPAA or other supported standards	Claim submission and inquiry; Eligibility inquiry and response; Prior authorization request and response	Web portal (preferred); BBS
Tape Cartridge, Host-to-Host	Ability to format files as HIPAA or other supported standards	Claim submission and inquiry; Eligibility inquiry and response; Prior authorization request and response	BBS